

709000093417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

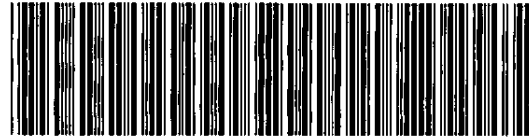
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500258975595

04/28/14--01020--017 \*\*35.00

FILED  
14 APR 28 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 07 2014

C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cables Industries, Inc  
Name of Corporation

**DOCUMENT NUMBER:** P09000093417

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

German Arellano

Name of Contact Person

Cables Industries, Inc

Firm/Company

8950 SW 74 Court Suite 2201 A-40

Address

Miami, FL 33156

City/State and Zip Code

german@cablesindustries.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

German Arellano

Name of Contact Person

at 786 3630235

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Cables Industries, Inc
2. The principal office address: 8950 SW 74 Court Suite 2201 A-40 Miami FI 33156
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: Nov 13, 2014 Document number: P09000093417

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Arellano, German P

1315 SW 139 PI

Miami, FI 33184

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Arellano, German

8950 SW 74 Court Suite 2201 A-40


P.O. Box NOT acceptable

Miami, FI 33156

FILED  
14 APR 28 PM 2:58  
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

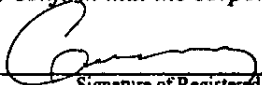
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

German Arellano

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

04/23/2014

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

**\*\*\* FILING FEE: \$35.00 \*\*\***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314